

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the Special Notice of Funding Opportunity (NOFO) to Address Unsheltered and Rural Homelessness (Special NOFO) Competition process must be submitted to SpecialCoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Unique Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under Special NOFO. For more information see the Special NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the Special NOFO and the FY 2022 General Section NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- Only new projects may be submitted. New projects must select Unsheltered Set Aside or Rural Set Aside as their funding opportunity. Project applicants must communicate with their CoC to make sure they are applying for the correct funding opportunity.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new project that fails to adhere to (24 CFR part 578 and application requirements set forth in the Special NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application:

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 09/16/2022

4. Applicant Identifier:

4a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Harrisonburg Redevelopment and Housing Authority

b. Employer/Taxpayer Identification Number (EIN/TIN): 54-0625939

c. UEI: TNVBJGK8ANE5

d. Address

Street 1: 286 Kelley Street

Street 2:

City: Harrisonburg

County: Rockingham

State: Virginia

Country: United States

Zip / Postal Code: 22802-4721

e. Organizational Unit (optional)

Department Name: N/A

Division Name: N/A

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Mr.

First Name: Isaiah

Middle Name:

Last Name: Mejah

Suffix:

Title: CoC Coordinator

Organizational Affiliation: Harrisonburg Redevelopment and Housing Authority

Telephone Number: (540) 209-1594

Extension: 106

Fax Number: (540) 432-1113

Email: IsaiahM@harrisonburgrha.com

1C. SF-424 Application Details

9. Type of Applicant: La. Public Housing Authority

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program
CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N-25S
Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:
Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): Virginia
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: Rural Set Aside FY2022

16. Congressional District(s):

16a. Applicant: VA-006, VA-010

16b. Project: VA-006
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 07/01/2023

b. End Date: 06/30/2026

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? c. Program is not covered by E.O. 12372.

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Michael

Middle Name: G.

Last Name: Wong

Suffix:

Title: Executive Director

Telephone Number: (540) 434-7386
(Format: 123-456-7890)

Fax Number: (540) 432-1113
(Format: 123-456-7890)

Email: wongway@harrisonburgrha.com

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 09/16/2022

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Harrisonburg Redevelopment and Housing Authority

Prefix: Mr.

First Name: Michael

Middle Name: G.

Last Name: Wong

Suffix:

Title: Executive Director

Organizational Affiliation: Harrisonburg Redevelopment and Housing Authority

Telephone Number: (540) 434-7386

Extension: 227

Email: wongway@harrisonburgrha.com

City: Harrisonburg

County: Rockingham

State: Virginia

Country: United States

Zip/Postal Code: 22802-4721

2. Employer ID Number (EIN): 54-0625939

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

4a. Total Amount Requested for this project: \$1,012,476.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
 (For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
NA	NA		NA
NA	NA		NA
NA	NA		NA
NA	NA		NA
NA	NA		NA

Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.

Part III Interested Parties

You must disclose:

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
NA		NA	\$0.00	0%
NA		NA		
NA		NA		
NA		NA		
NA		NA		

Note: If there are no other people included, write NA in the boxes.

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Michael Wong, Executive Director

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 09/16/2022

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Harrisonburg Redevelopment and Housing Authority

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees — (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted — (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will — (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application. Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

X

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Michael

Middle Name: G.

Last Name: Wong

Suffix:

Title: Executive Director

Telephone Number: (540) 434-7386
(Format: 123-456-7890)

Fax Number: (540) 432-1113
(Format: 123-456-7890)

Email: wongway@harrisonburgrha.com

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 09/16/2022

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Harrisonburg Redevelopment and Housing Authority

Name / Title of Authorized Official: Michael Wong, Executive Director

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 09/16/2022

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352. Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program? No

Legal Name: Harrisonburg Redevelopment and Housing Authority

Street 1: 286 Kelley Street

Street 2:

City: Harrisonburg

County: Rockingham

State: Virginia

Country: United States

Zip / Postal Code: 22802-4721

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

Authorized Representative

Prefix: Mr.

First Name: Michael

Middle Name: G.

Last Name: Wong

Suffix:

Title: Executive Director

Telephone Number: (540) 434-7386
(Format: 123-456-7890)

Fax Number: (540) 432-1113
(Format: 123-456-7890)

Email: wongway@harrisonburgrha.com

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 09/16/2022

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |

- 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327~333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93~205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Harrisonburg Redevelopment and Housing Authority

Prefix: Mr.

First Name: Michael

Middle Name: G.

Last Name: Wong

Suffix:

Title: Executive Director

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 09/16/2022

1L. SF-424D

Are you requesting CoC Program funds for No
construction costs in this application?

No SF-424D is required. Select "Save and Next" to move to the next screen.

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$142,409

Organization	Type	Sub-Award Amount
Shenandoah Alliance for Shelter	M. Nonprofit with 501C3 IRS Status	\$80,075
Strength in Peers	M. Nonprofit with 501C3 IRS Status	\$62,334

2A. Project Subrecipients Detail

a. Organization Name: Shenandoah Alliance for Shelter

b. Organization Type: M. Nonprofit with 501C3 IRS Status
If "Other" specify:

c. Employer or Tax Identification Number: 54-1520502

d. Physical Address

Street 1: 135 S Main Street, 2nd Floor

Street 2:

City: Woodstock

State: Virginia

Zip Code: 22664

e. Congressional District(s): VA-006
(for multiple selections hold CTRL key)

f. Is the subrecipient a Faith-Based Organization? No

g. Has the subrecipient ever received a federal grant, either directly from a federal agency or through a State/local agency? Yes

h. Expected Sub-Award Amount: \$80,075

i. Contact Person

Prefix: Mrs.

First Name: Katie

Middle Name:

Last Name: Furneisen
Suffix:
Title: Executive Director
E-mail Address: katiefurneisen@shenandoahallianceforshelter.org
Confirm E-mail Address: katiefurneisen@shenandoahallianceforshelter.org
Phone Number: 540-459-3212
Extension:
Fax Number: 540-459-3235

2A. Project Subrecipients Detail

- a. Organization Name:** Strength in Peers
- b. Organization Type:** M. Nonprofit with 501C3 IRS Status
If "Other" specify:
- c. Employer or Tax Identification Number:** 81-1604006
- d. Physical Address**
Street 1: 9560 S Congress St.
Street 2:
City: New Market,
State: Virginia
Zip Code: 22844
- e. Congressional District(s):** VA-006
(for multiple selections hold CTRL key)
- f. Is the subrecipient a Faith-Based Organization?** No

g. Has the subrecipient ever received a federal grant, either directly from a federal agency or through a State/local agency? Yes

h. Expected Sub-Award Amount: \$62,334

i. Contact Person

Prefix: Mrs.

First Name: Nicky

Middle Name:

Last Name: Fadley

Suffix:

Title: Executive Director

E-mail Address: nicky@strengthenpeers.org

Confirm E-mail Address: nicky@strengthenpeers.org

Phone Number: 540-217-0869

Extension:

Fax Number:

2B. Experience of Applicant, Subrecipient(s), and Other Partners

1. Describe your organization’s (and subrecipient(s) if applicable) experience in effectively utilizing federal funds and performing the activities proposed in the application.

Since 1958 when it was established, Harrisonburg Redevelopment and Housing Authority (HRHA) has effectively used HUD funding for rental assistance, housing and housing services. HRHA is the current Federal and State collaborative applicant, HMIS administrator, and planning agency for the Western Virginia Continuum of Care (CoC). Shenandoah Alliance for Shelter (SAS) and Strength in Peer (SIP) are long-standing, active CoC members and are current recipients of federal, state and local funding for housing services, peer recovery support, case management, street outreach, and homelessness prevention services.

SAS was founded in 1989 in response to the lack of shelter and services available to the growing number of individuals and families experiencing homelessness in Shenandoah County. SAS partners with local agencies and nonprofits, and leverages federal funding sources, to provide strength-based case management, housing search and counseling, and financial assistance to vulnerable households that are literally homeless or imminently at-risk of becoming homeless. SAS employs a housing counselor, housing assistant and an on-site centralized housing intake operator to ensure that community members in need are able to access assistance without significant barriers. Its staff also are experienced at providing case management services, are connected with local community service providers, and are knowledgeable about completing applications for SSI/SSDI and other public benefits.

SIP is a peer-run Recovery Community Organization founded in 2015. More than half of its Board of Directors and all staff have personal lived experience with recovery from substance use, mental health and trauma-related challenges, including homelessness and incarceration. SIP has extensive experience providing outreach, case management and peer recovery support to individuals experiencing homelessness, returning from incarceration, and seeking recovery from mental/behavioral health challenges in Shenandoah and Page Counties. In the last 12 months, the organization served 227 unduplicated individuals in these counties, including 123 people through its substance use recovery program, 72 through its jail reentry program, 26 through its needle exchange and comprehensive harm reduction program, and 20 through its homeless street outreach program. SIP will build on its experience to provide supportive services in this project.

2. Describe your organization’s (and subrecipient(s) if applicable) experience in leveraging Federal, State, local and private sector funds.

HRHA, SAS and SIP have extensive experience leveraging public and private funds to increase the capacity of programs and reach more individuals in need. All three organizations regularly apply for federal, state and local grants to develop and expand services. They also engage community members and businesses to provide donations and in-kind contributions, such as volunteer services, office space, and supplies like phones and computers. For example, SIP regularly leverages its federal and state grant-funded programs to obtain local government and community foundation support. The organization currently funds its Shenandoah and Page County programs with a federal grant from the Health Resources and Services Administration's Federal Office of Rural Health Policy and three state grants from the Virginia Department of Behavioral Health and Developmental Services, Virginia Department of Health, and the Virginia Homeless Solutions Program. SIP has been successful at obtaining grants from community foundations and donations from civic clubs to supplement its programs and fill budget gaps, such as to meet the growing demand for telecounseling and telepsychiatry services for uninsured/underinsured participants in its recovery programs. Similarly, SAS leverages community partnership to fill gaps in funding from its Virginia Homeless Solutions Program grants and HOME Funds. SAS partners with the Shenandoah County Salvation Army and local church relief programs to support a utility assistance program for households at-risk of homelessness. It also collaborates with faith-based organizations and the United Way of the Northern Shenandoah Valley to connect its participants to other temporary financial assistance programs that help individuals and families achieve transportation and financial goals to prevent homelessness and support self-sufficiency and housing stability.

3. Describe your organization's (and subrecipient(s) if applicable) financial management structure.

HRHA’s accounting policies and practices are designed to conform with accounting and financial reporting principles established by the Governmental Accounting Standards Board (GASB) and to abide by federal, state and local laws and regulations. A five member Board of Commissioners appointed by Harrisonburg City Council governs HRHA. The Executive Director and Finance Director oversee financial management operations. Every month, the Executive Director and Finance Director review and analyze operating statements to identify substantial financial variances. They also present summary financial reports to the Board of Commissioners monthly. Annually, an Independent Auditor performs a financial audit as required by the US Office of Management and Budget (OMB) Circular A-133 and HUD rules and regulations. The Executive Director works with department directors to resolve any findings identified in the audit. The Executive Director and Finance Director present the audit findings and a detailed financial report to the Board of Commissioners annually.

SIP’s financial management policies comply with GASB reporting principles and the requirements of its federal and state grants. Every year, the Board of Directors approves an organizational budget and reviews the financial management policies and procedures manual. The organization has an ongoing contract with Brown Edwards & Company, LLP to provide accounting and payroll services. To ensure internal controls, all expenditures are prepared by an office coordinator and approved by the Board Treasurer and Executive Director using an online payment management system called bill.com.

Timekeeping controls require staff to assign hours worked to specific grants to provide an accurate distribution of wages and benefits. Additionally, the organization accounts undergo an annual single audit per OMB Circular A-133 performed by Beachy Arehart, PLLC.

SAS has established accounting policies and procedures to adhere to the OMB Circular A-133 guidelines for federal funding compliance and conforms with the GASB reporting guidelines. Monthly internal audits are performed under the guidance of our Board Treasurer and Executive Director, and presented to the Board of Directors for approval. Annual financial audits are performed by an independent and objective firm for financial accuracy with all results presented to the Board of Directors to address any discrepancies in a timely manner.

**4. Are there any unresolved HUD monitoring or
OIG audit findings for any HUD grants (including
ESG) under your organization?** No

3A. Project Detail

1. CoC Number and Name: VA-513 - Harrisonburg, Winchester/Western Virginia CoC

2. CoC Collaborative Applicant Name: Harrisonburg Redevelopment and Housing Authority

3. Project Name: Rural Set Aside FY2022

4. Project Status: Standard

5. Is this project applying for the Unsheltered Homelessness Set Aside or Rural Set Aside? Rural Set Aside

5a. Area(s) affected by the project (state(s) only): Virginia
(for multiple selections hold CTRL key)

5b. Area(s) affected by the project (rural geo-code(s) only): 519139 Page County, 519171 Shenandoah County
(for multiple selections hold CTRL key)

5c. Area(s) affected by the project (tribal geo-code(s) only). Only make a selection if the project will serve a tribal area. If no tribal area will be served, leave this field blank. Do not make any selections:
(for multiple selections hold CTRL key)

6. Component Type: PH

6a. Select the type of PH project: RRH

7. Is your organization or expected subrecipient a victim service provider defined in 24 CFR 578.3 and uses a comparable HMIS database? No

8. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? No

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

Addressing homelessness in Shenandoah and Page Counties is challenging due to the lack of affordable housing, geographic distances, and limited supportive services. The goal of this project is to permanently house 17 vulnerable households experiencing homelessness and provide them support to become self-sufficient by the end of the three-year project. The project will strengthen the Centralized Intake coordinated entry program at SAS to connect residents at risk for or experiencing homelessness in these two counties to housing assistance services. Centralized Intake will screen households for eligibility and refer them to this program. The project will provide enrolled participants with dedicated housing search and counseling services. A Housing Counselor at SAS will conduct outreach to private landlords, help households identify and apply for affordable housing units, help households overcome barriers to housing, and work with households and landlords to address lease violations and other challenges if they arise.

HRHA will provide participants up to three years of rental assistance. This duration of rental assistance is necessary to provide vulnerable households time to achieve self-sufficiency goals to prevent a return to homelessness, such as completing vocational training to obtain a higher paying job, completing a drug court program to recover from substance use disorder and avoid a criminal conviction, or having a parent stay home with young children until they are old enough to go to school.

Participants will receive case management and peer recovery support from a Peer Recovery Specialist at SIP. The Peer Recovery Specialist will conduct needs assessments to identify self-sufficiency goals related to maintaining housing, managing finances, employment, childcare, education and vocational training programs, food, health insurance and other public benefits, health care, and mental and behavioral health challenges. The Peer Recovery Specialist will meet with participants weekly to provide case management and peer recovery support. Peer recovery support will help participants learn to better manage substance use, mental health and trauma-related challenges that are common among households experiencing homelessness. The Peer Recovery Specialist also will provide participants transportation assistance to important appointments and help them to develop a long-term transportation solution, such as by learning to save to purchase a private vehicle.

1a. Describe how the proposed project is consistent with the plan described by the CoC in response to Section VII.B.4 of this NOFA?

The project will build on existing programs and capacity that project partners have in Shenandoah and Page Counties. SIP operates street outreach to identify unsheltered and vulnerable homeless individuals and families. Its street outreach team conducts weekly outreach at the one homeless day shelter in Page County called Arise. It also goes to homeless encampments and locations where individuals who are homeless congregate in the two counties, and accepts referrals from community members and agencies of individuals who appear to be homeless. The team works to build relationships with individuals and families, connect them to the Western Virginia CoC’s Centralized Intake, and provide additional case management and peer recovery support. Additionally, SAS already provides coordinated entry/centralized intake services, as well as housing search and counseling services in Shenandoah and Page Counties. However, these services are limited and lack the capacity to adequately respond to the complex challenges faced by the most vulnerable homeless individuals and families, particularly identifying landlords who are willing to partner with the program and work with enrolled participants. Finally, the project builds on HRHA’s significant capacity to manage a grant of this nature, process payments to landlords and sub-grant recipients, and ensure the necessary cash flow to avoid interruptions to programmatic operations. HRHA also plans to apply for HUD Stabilization vouchers and will allocate 25% of awarded vouchers to support the proposed project.

2. For each primary project location, or structure, enter the number of days from the execution of the grant agreement that each of the following milestones will occur if this project is selected for conditional award.

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	30			
Begin program participant enrollment	60			
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin	90			
Leased or rental assistance units or structure, and supportive services near 100% capacity	120			
Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation				
Complete rehabilitation				
Start new construction				
Complete new construction				

3. Check the appropriate box(s) if this project will have a specific subpopulation focus.

(Select ALL that apply)

N/A - Project Serves All Subpopulations	<input checked="" type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

4. Will your project participate in the CoC's Coordinated Entry (CE) process or recipient organization is a victim service provider, as defined in 24 CFR 578.3 and uses an alternate CE process that meets HUD's minimum requirements? Yes

5. Housing First

5a. Will the project quickly move participants into permanent housing? Yes

5b. Will the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5c. Will the project prevent program participant termination from the project for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>

Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5d. Will the project follow a "Housing First" approach? Yes
 (Click 'Save' to update)

6. Will program participants be required to live in a specific structure, unit, or locality at any time while in the program? No

7. Will more than 16 persons live in a single structure? No

8. Will this project serve a structurally disadvantaged area? Structurally disadvantaged is defined as geographic areas that have high levels of homelessness, housing distress, or poverty, and are located where CoC services have until now been entirely unavailable. No

4A. Supportive Services for Participants

1. Describe how program participants will be assisted to obtain and remain in permanent housing.

Shenandoah and Page Counties in Virginia are both rural with population densities of only 87.0 people per square mile and 76.5 people per square mile, respectively. Together, the two counties span over 800 square miles in northwestern Virginia. Shenandoah County is long and nestled between the Appalachian Plateau and Blue Ridge Mountains in the Shenandoah Valley. Page County is fairly isolated between the Blue Ridge and Massanutten Mountains in the Page Valley and is only accessible by two main roads that run north-to-south and east-to-west. Because of the mountains and rural nature, both counties have few community resources and residents must travel long distances to access services in neighboring cities and towns. Shenandoah has a public bus that runs north-to-south through the county on historic Rt. 11. This is the only public transportation in the two counties.

Socio-economic indicators suggest that both counties are more distressed than state and national averages, as evidenced by high rates of disabilities and low rates of insurance coverage, employment, median household incomes, educational attainment, and broadband internet access. As many as 10.7% of Shenandoah residents under age 65 years and 13% of Page residents under age 65 years have a disability compared with only 8.0% statewide. The percentage of people who are under age 65 who are uninsured is 10.7% in Shenandoah and 10.8% in Page compared with 8.0% statewide. Only 61.1% of Shenandoah residents over age 16 and 59.8% of Page residents over age 16 years are employed compared with 64.0% statewide. Most individuals must travel outside of the counties for employment opportunities since there are only a total of 1,290 employer establishments located in the two counties. Median household income is only \$56,114 in Shenandoah and \$51,878 in Page compared with \$76,398 statewide. As many as 10.1% of Shenandoah residents and 11.3% of Page residents live in poverty. Educational attainment is also low and only 19.7% of Shenandoah residents over age 25 years and 14.3% of Page residents over age 25 years have achieved a Bachelor's degree or higher compared with 39.5% statewide. Additionally, only 76.1% of Shenandoah households and 72.0% of Page households have broadband Internet compared with 86.1% statewide. (Census Quickfacts accessed 9/16/22)

Both Shenandoah and Page Counties have few affordable housing resources. Shenandoah, in particular, has seen a significant increase in housing demand, particularly among individuals who are moving to the area from nearby urban centers such as Washington DC and Northern Virginia. Both counties also are experiencing a deterioration of older units that are no longer fit for human habitation, particularly manufactured homes. Low income individuals and families are unable to afford housing and lack the education, income and resources to compete for the limited available units. Addressing homelessness in Shenandoah and Page Counties is challenging due to

2. Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.

The project will build on existing programs and capacity that project partners have in Shenandoah and Page Counties. SIP operates street outreach to identify unsheltered and vulnerable homeless individuals and families. Its street outreach team conducts weekly outreach at the one homeless day shelter in Page County called Arise. It also goes to homeless encampments and locations where individuals who are homeless congregate in the two counties, and accepts referrals from community members and agencies of individuals who appear to be homeless. The team works to build relationships with individuals and families, connect them to the Western Virginia CoC's Centralized Intake, and provide additional case management and peer recovery support. Additionally, SAS already provides coordinated entry/centralized intake services, as well as housing search and counseling services in Shenandoah and Page Counties. However, these services are limited and lack the capacity to adequately respond to the complex challenges faced by the most vulnerable homeless individuals and families, particularly identifying landlords who are willing to partner with the program and work with enrolled participants. Finally, the project builds on HRHA's significant capacity to manage a grant of this nature, process payments to landlords and sub-grant recipients, and ensure the necessary cash flow to avoid interruptions to programmatic operations. HRHA also plans to apply for HUD Stabilization vouchers and will allocate 25% of awarded vouchers to support the proposed project.

**3. For all supportive services available to program participants, indicate who will provide them and how often they will be provided.
 Click 'Save' to update.**

Supportive Services	Provider	Frequency
Assessment of Service Needs	Subrecipient	Quarterly
Assistance with Moving Costs	Subrecipient	Semi-annually
Case Management	Subrecipient	Weekly
Child Care	Partner	Daily
Education Services	Partner	Quarterly
Employment Assistance and Job Training	Partner	Monthly
Food	Partner	Weekly
Housing Search and Counseling Services	Subrecipient	Weekly
Legal Services	Partner	Monthly
Life Skills Training	Subrecipient	Weekly
Mental Health Services	Subrecipient	Weekly
Outpatient Health Services	Partner	Monthly
Outreach Services	Subrecipient	Weekly
Substance Abuse Treatment Services	Subrecipient	Weekly

Transportation
Utility Deposits

Subrecipient	Weekly
Subrecipient	Semi-annually

Identify whether the project will include the following activities:

- 4. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? **Yes**
- 5. Annual follow-ups with program participants to ensure mainstream benefits are received and renewed? **Yes**
- 6. Will program participants have access to SSI/SSDI technical assistance provided by this project the applicant, a subrecipient, or partner agency? **Yes**
- 6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months? **Yes**

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

Total Units: 18

Total Beds: 36

Housing Type	Housing Type (JOINT)	Units	Beds	Dedicated CH Beds
Scattered-site apartments (...)	---	8	13	0
Scattered-site apartments (...)	---	5	12	0
Scattered-site apartments (...)	---	5	11	0

4B. Housing Type and Location Detail

1. Housing Type: Scattered-site apartments (including efficiencies)

2. Indicate the maximum number of units and beds available for program participants at the selected housing site.

2a. Units: 8

2b. Beds: 13

3. Address

Project applicants must enter an address for all proposed and existing properties. If the location is not yet known, enter the expected location of the housing units. For Scattered-site and Single-family home housing, or for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located or where the majority of beds are located as of the application submission. Where the project uses tenant-based rental assistance in the RRH portion, or if the address for scattered-site or single-family homes housing cannot be identified at the time of application, enter the address for the project's administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.

Street 1: 123 Shelley Lane

Street 2:

City: Luray,

State: Virginia

ZIP Code: 22835

***4. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered.
(for multiple selections hold CTRL key)**

519139 Page County

4B. Housing Type and Location Detail

1. Housing Type: Scattered-site apartments (including efficiencies)

2. Indicate the maximum number of units and beds available for program participants at the selected housing site.

2a. Units: 5

2b. Beds: 12

3. Address

Project applicants must enter an address for all proposed and existing properties. If the location is not yet known, enter the expected location of the housing units. For Scattered-site and Single-family home housing, or for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located or where the majority of beds are located as of the application submission. Where the project uses tenant-based rental assistance in the RRH portion, or if the address for scattered-site or single-family homes housing cannot be identified at the time of application, enter the address for the project's administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.

Street 1: 132 Valley Vista Drive

Street 2:

City: Woodstock

State: Virginia

ZIP Code: 22664

***4. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered. (for multiple selections hold CTRL key)**

519171 Shenandoah County

4B. Housing Type and Location Detail

1. Housing Type: Scattered-site apartments (including efficiencies)

2. Indicate the maximum number of units and beds available for program participants at the selected housing site.

2a. Units: 5

2b. Beds: 11

3. Address

Project applicants must enter an address for all proposed and existing properties. If the location is not yet known, enter the expected location of the housing units. For Scattered-site and Single-family home housing, or for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located or where the majority of beds are located as of the application submission. Where the project uses tenant-based rental assistance in the RRH portion, or if the address for scattered-site or single-family homes housing cannot be identified at the time of application, enter the address for the project's administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.

Street 1: 3232 South Main St,

Street 2:

City: Toms Brook

State: Virginia

ZIP Code: 22660

***4. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered.
(for multiple selections hold CTRL key)**

519171 Shenandoah County

5A. Program Participants - Households

Households Table

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Number of Households	13	5	0	18
	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24	12	5		17
Persons ages 18-24	1	0		1
Accompanied Children under age 18	18		0	18
Unaccompanied Children under age 18			0	0
Total Persons	31	5	0	36

Click Save to automatically calculate totals

5B. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24				8			5			
Persons ages 18-24				1						
Children under age 18	0			0	0	0	6	0	0	12
Total Persons	0	0	0	9	0	0	11	0	0	12

Click Save to automatically calculate totals

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24			1	3		1				
Persons ages 18-24										
Total Persons	0	0	1	3	0	1	0	0	0	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0				0	0	0	0	0	0

Describe the "Persons Not Represented by a Listed Subpopulation" referred to above:

Children without disabilities

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2024? Yes

2. What type of funding is this project applying for in this Special Unsheltered and Rural Homelessness CoC Program Competition? Rural Set Aside

3. Does this project propose to allocate funds according to an indirect cost rate? Yes

Indirect cost rate proposals should be submitted as soon as the applicant is notified of a conditional award. Conditional award recipients will be asked to submit the proposal rate during the e-snaps post-award process.

Applicants with an approved indirect cost rate must submit a copy of the approval with this application.

3a. Complete the indirect cost rate table below

Agency	Indirect Cost Rate	Direct Cost Base	Plan approved by cognizant agency or will use 10% de minimis rate
Harrisonburg Redevelopment and Housing Authority	10%	\$306,811	Will use 10% de minimis rate

4. Select a grant term: 3 Years

* 5. Select the costs for which funding is requested:

Rental Assistance	X
Supportive Services	X
HMIS	

6E. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the  icon. To view or update information already listed, select the  icon.

Total Request for Grant Term:			\$532,044
Total Units:			18
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
TRA	VA - Shenandoah County, VA (5117199999)	10	\$314,820
TRA	VA - Page County, VA (5113999999)	8	\$217,224

Rental Assistance Budget Detail

Instructions:

Type of Rental Assistance: Select the applicable type of rental assistance from the dropdown menu. Options include tenant-based (TRA), sponsor-based (SRA), and project-based assistance (PRA). Each type has unique requirements and applicants should refer to the 24 CFR 578.51 before making a selection.

Metropolitan or non-metropolitan fair market rent area: This is a required field. Select the FY 2016 FMR area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rents in the chart below.

Size of Units: These options are system generated. Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.

of units: This is a required field. For each unit size, enter the number of units for which funding is being requested.

FMR: These fields are populated with the FY 2016 FMR amounts based on the FMR area selected by the applicant. The FMRs are available online at <http://www.huduser.org/portal/datasets/fmr.html>.

12 Months: These fields are populated with the value 12 to calculate the annual rent request.

Total Request: This column populates with the total calculated amount from each row based on the number of units multiplied by the corresponding FMR and by 12 months.

Total Units and Annual Assistance Requested: The fields in this row are automatically calculated based on the total number of units and the sum of the total requests per unit size per year.

Grant Term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total annual assistance requested multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

Type of Rental Assistance: TRA

Metropolitan or non-metropolitan fair market rent area: VA - Shenandoah County, VA (5117199999)

Size of Units	# of Units (Applicant)	FMR Area (Applicant)	12 Months	Total Request (Applicant)
SRO	0 x	\$413 x	12	= \$0
0 Bedroom	0 x	\$550 x	12	= \$0
1 Bedroom	3 x	\$635 x	12	= \$22,860

2 Bedrooms	4	x	\$828	x	12	=	\$39,744
3 Bedrooms	3	x	\$1,176	x	12	=	\$42,336
4 Bedrooms	0	x	\$1,258	x	12	=	\$0
5 Bedrooms	0	x	\$1,447	x	12	=	\$0
6 Bedrooms	0	x	\$1,635	x	12	=	\$0
7 Bedrooms	0	x	\$1,824	x	12	=	\$0
8 Bedrooms	0	x	\$2,013	x	12	=	\$0
9 Bedrooms	0	x	\$2,202	x	12	=	\$0
Total Units and Annual Assistance Requested	10						\$104,940
Grant Term							3 Years
Total Request for Grant Term							\$314,820

Click the 'Save' button to automatically calculate totals.

Rental Assistance Budget Detail

Instructions:

Type of Rental Assistance: Select the applicable type of rental assistance from the dropdown menu. Options include tenant-based (TRA), sponsor-based (SRA), and project-based assistance (PRA). Each type has unique requirements and applicants should refer to the 24 CFR 578.51 before making a selection.

Metropolitan or non-metropolitan fair market rent area: This is a required field. Select the FY 2016 FMR area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rents in the chart below.

Size of Units: These options are system generated. Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.

of units: This is a required field. For each unit size, enter the number of units for which funding is being requested.

FMR: These fields are populated with the FY 2016 FMR amounts based on the FMR area selected by the applicant. The FMRs are available online at <http://www.huduser.org/portal/datasets/fmr.html>.

12 Months: These fields are populated with the value 12 to calculate the annual rent request.

Total Request: This column populates with the total calculated amount from each row based on the number of units multiplied by the corresponding FMR and by 12 months.

Total Units and Annual Assistance Requested: The fields in this row are automatically calculated based on the total number of units and the sum of the total requests per unit size per year.

Grant Term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total annual assistance requested multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

Type of Rental Assistance: TRA

Metropolitan or non-metropolitan fair market rent area: VA - Page County, VA (5113999999)

Size of Units	# of Units (Applicant)	FMR Area (Applicant)	12 Months	Total Request (Applicant)
SRO	x	\$371	x 12	= \$0
0 Bedroom	x	\$495	x 12	= \$0
1 Bedroom	2 x	\$621	x 12	= \$14,904
2 Bedrooms	4 x	\$725	x 12	= \$34,800
3 Bedrooms	2 x	\$946	x 12	= \$22,704
4 Bedrooms	x	\$1,241	x 12	= \$0
5 Bedrooms	x	\$1,427	x 12	= \$0
6 Bedrooms	x	\$1,613	x 12	= \$0
7 Bedrooms	x	\$1,799	x 12	= \$0

8 Bedrooms		x	\$1,986	x	12	=	\$0
9 Bedrooms		x	\$2,172	x	12	=	\$0
Total Units and Annual Assistance Requested	8						\$72,408
Grant Term							3 Years
Total Request for Grant Term							\$217,224

Click the 'Save' button to automatically calculate totals.

6F. Supportive Services Budget



A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs	Comprehensive needs assessment to identify housing barriers and other needs related to social determinants of health. Needs assessments will be used to develop strength-based and person-centered case plans for each participating household.	\$25,000
2. Assistance with Moving Costs		
3. Case Management	SAS will provide participants case management from enrollment through housing placement including referrals and assistance navigating community services. Following housing placement, SIP will provide ongoing case management to help participants achieve self-sufficiency.	\$30,167
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services	SAS will provide participants housing search and counseling services to help them get into housing and address challenges with landlords.	\$39,296
9. Legal Services		
10. Life Skills	SIP will provide participants one-on-one coaching on life skills such as communication skills and financial management. SAS will provide them one-on-one coaching with meeting tenant responsibilities.	\$5,000
11. Mental Health Services	SIP will provide participants individual peer recovery support to address mental health challenges and will refer them to other types of treatment and recovery support based on their needs and preferences.	\$5,000
12. Outpatient Health Services		
13. Outreach Services	SIP will conduct outreach to organizations and agencies that are likely to have referrals to submit to the program. Its street outreach team also will conduct outreach to emergency shelters, day shelters, encampments and other locations.	\$5,000
14. Substance Abuse Treatment Services	SIP will provide participants individual peer recovery support to address substance use challenges and will refer them to other types of treatment and recovery support based on their needs and preferences.	\$5,000
15. Transportation	SIP will provide participants transportation assistance to important appointments and will help them to identify long-term solutions to their transportation needs, including saving to purchase a personal vehicle.	\$6,500
16. Utility Deposits	SAS will provide participants financial assistance with paying for utility deposits at housing placement.	\$8,500
17. Operating Costs		

18. (Rural Set Aside ONLY) Section 491 Eligible Activities		
Total Annual Assistance Requested		\$129,463
Grant Term		3 Years
Total Request for Grant Term		\$388,389

Click the 'Save' button to automatically calculate totals.

6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

Summary for Match

Total Amount of Cash Commitments:	\$30,000
Total Amount of In-Kind Commitments:	\$240,000
Total Amount of All Commitments:	\$270,000

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Type	Source	Name of Source	Amount of Commitments
Cash	Private	Harrisonburg Rede...	\$30,000
In-Kind	Private	Harrisonburg Rede...	\$60,000
In-Kind	Private	Shenandoah Allian...	\$30,000
In-Kind	Private	Strength in Peers	\$150,000

Sources of Match Detail

- 1. Type of Match commitment: Cash
- 2. Source: Private
- 3. Name of Source: Harrisonburg Redevelopment and Housing Authority
(Be as specific as possible and include the office or grant program as applicable)
- 4. Amount of Written Commitment: \$30,000

Sources of Match Detail

- 1. Type of Match commitment: In-Kind
- 2. Source: Private
- 3. Name of Source: Harrisonburg Redevelopment and Housing Authority
(Be as specific as possible and include the office or grant program as applicable)
- 4. Amount of Written Commitment: \$60,000

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Sources of Match Detail

- 1. Type of Match commitment: In-Kind
- 2. Source: Private
- 3. Name of Source: Shenandoah Alliance For Shelter
(Be as specific as possible and include the office or grant program as applicable)
- 4. Amount of Written Commitment: \$30,000

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Sources of Match Detail

1. **Type of Match commitment:** In-Kind
2. **Source:** Private
3. **Name of Source:** Strength in Peers
(Be as specific as possible and include the office or grant program as applicable)
4. **Amount of Written Commitment:** \$150,000

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

6J. Summary Budget

The following information summarizes the funding request for the total term of the project. However, administrative costs can be entered in 8. Admin field below.

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
1a. Acquisition			\$0
1b. Rehabilitation			\$0
1c. New Construction			\$0
2a. Leased Units	\$0	3 Years	\$0
2b. Leased Structures	\$0	3 Years	\$0
3. Rental Assistance	\$177,348	3 Years	\$532,044
4. Supportive Services	\$129,463	3 Years	\$388,389
5. Operating	\$0	3 Years	\$0
6. HMIS	\$0	3 Years	\$0
7. Sub-total Costs Requested			\$920,433
8. Admin (Up to 10%)			\$92,043
9. Total Assistance Plus Admin Requested			\$1,012,476
10. Cash Match			\$30,000
11. In-Kind Match			\$240,000
12. Total Match			\$270,000
13. Total Budget			\$1,282,476
14. Rural Set Aside Capacity Building (up to 20% of subtotal of all BLIS + Admin)			
15. Total Budget (+ Capacity Building)			\$1,282,476

MAXIMUM CAPACITY ALLOWABLE HIDDEN: 202,495

Click the 'Save' button to automatically calculate totals.

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachment(s)	No		
3) Other Attachment(s)	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

7A. In-Kind MOU Attachment

Document Type	Required?	Document Description	Date Attached
In-Kind Match MOU	No		

Attachment Details

Document Description:

7D. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR part 578 or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

15-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

Applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provide

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official: Michael Wong

Date: 09/16/2022

Title: Executive Director

Applicant Organization: Harrisonburg Redevelopment and Housing Authority

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

Active SAM Status Requirement.

I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

8B. Submission Summary

Applicant must click the submit button once all forms have a status of Complete.

Applicant must click the submit button once all forms have a status of Complete.

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	09/07/2022
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	09/16/2022
1E. SF-424 Compliance	09/07/2022
1F. SF-424 Declaration	09/07/2022
1G. HUD 2880	09/16/2022
1H. HUD 50070	09/07/2022
1I. Cert. Lobbying	09/07/2022
1J. SF-LLL	09/07/2022
1K. SF-424B	09/07/2022
1L. SF-424D	09/07/2022
2A. Subrecipients	09/16/2022
2B. Experience	09/16/2022
3A. Project Detail	09/16/2022
3B. Description	09/16/2022
4A. Services	09/16/2022
4B. Housing Type	09/16/2022
5A. Households	09/16/2022
5B. Subpopulations	09/16/2022
6A. Funding Request	09/16/2022
6E. Rental Assistance	09/16/2022
6F. Supp Srvcs Budget	09/16/2022
6I. Match	09/16/2022
6J. Summary Budget	No Input Required
7A. Attachment(s)	No Input Required
7A. In-Kind MOU Attachment	No Input Required
7D. Certification	09/16/2022

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